

# 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Senate Leadership Fund</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00571703
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on

Full Name of Payee <b>Main Street Media</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 04 / 2016</b>
Mailing Address P.O. Box 25093		Amount <b>2002525.50</b>
City <b>Alexandria</b>	State <b>VA</b>	Zip Code <b>22313</b>
Purpose of Expenditure TV/Media Placement	Category/Type	Transaction ID : <b>SE3</b> Date of Disbursement or Obligation MM / DD / YYYY <b>09 / 30 / 2016</b>
Name of Federal Candidate Murphy, Patrick, , ,		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>FL</b>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>DMM Media</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 04 / 2016</b>
Mailing Address 1911 N. Fort Myer Drive Ste 400		Amount <b>150.00</b>
City <b>Arlington</b>	State <b>VA</b>	Zip Code <b>22209</b>
Purpose of Expenditure TV/Media Production	Category/Type	Transaction ID : <b>SE4</b> Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 04 / 2016</b>
Name of Federal Candidate Murphy, Patrick, , ,		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>FL</b>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>2002675.50</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Crosby, Caleb, , ,

[Electronically Filed]

Date

MM / DD / YYYY  
**10 / 05 / 2016**

Signature